For Office Use Only: Checked By: Approved By: _			Form CG-EFR Rev 2/02
EXI	EMPT ORGANIZATION Note: Report	N ANNUAL FINANCIAL is due on January 30	REPORT
Exemption No:		Report for Calendar Year:	
Name of Organization:			
Address:Street			
Street		City	Zip Phone
SECTION 1 - REPORT			N.D.
Gaming Activity	Gross Receipts	Payouts	Net Receipts
Bingo Raffles	\$ \$	\$ \$	\$ \$
Non-Cash Prize Wheels	\$	\$	\$
Festival Games	\$	\$	\$
		T	*
Total Gaming Activity	\$	\$	\$
SECTION 2 - EXPEND On the lines listed below, prefrom the charitable gaming	rovide an itemized accounti	ing of how your organization	on spent the net receipts (profit)
Amount	Description		
\$			
\$			
\$			
\$			
\$ \$ \$ \$			
SECTION 3 - SIGNATU			f and ballefit is a
			of my knowledge and belief it is a cation officer) is based on all

Title

Title

Date

Date

Officer Name

Preparer (if other than officer listed above)